# 119000218932

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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fil	ing Officer:	

Office Use Only

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## Donna Lugar (formerly Donna Tisch) New Address: 5020 Clark Road, #514, Sarasota, FL 34233 New Phone Number: 941-600-9431

July 21, 2022

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Name Change

Dear Sir or Madam -

Attached are the following:

Name Change for Tisch Administrative Service, LLC (New Name: Lugar Administrative Services, LLC)

I have also enclosed the fee.

My daytime phone number is 941-600-9431.

If you have any questions or need anything further to make these changes, please let me know.

Thank you.

Verystruly yours,

Donna Lugar (formerly Donna Tisch)

New Address: 5020 Clark Road, #514, Sarasota, FL 34233/ New Phone #: 941-600-9431

### **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

Tisch Adm SUBJECT:	inistrative Services, LLC		
30bile1.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Donna Lugar (formerly Do	onna Tisch)	
		Name of Person	
	Lugar Administrative Serv	ices, LLC	(87)
		Firm/Company	ند: بن '
	5020 Clark Road, #514		```
	_	Address	
	Sarasota, FL 34238		: 
	_	City/State and Zip Code	
	donnatisch.com@gmail.com		-
		to be used for future annual report notif	fication)
For further information c	oncerning this matter, please c	all:	
Donna Lugar (formerly I	Donna Tisch)	941 600-9431 at ( )	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	he following amount:		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration S		Street Address: Registration Sec	etion
Division of C		Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tisch Administrative Services, LLC			
( <u>Name of the Limited</u> (A	Liability Comps Florida Limited	iny as <mark>it now appears on our</mark> Liability Company)	records.)
he Articles of Organization for this Limited Liab	oility Company	were filed on 08/27/2019	and assigned
forida document number L19000218932	•		
his amendment is submitted to amend the follow			
. If amending name, enter the new name of t	he limited liab	oility company here:	
ugar Administrative Services, LLC			18.3 1.2
ne new name must be distinguishable and contain the wor	ds "Limited Liabi	lity Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)		5020 Clark Road	
		#514	(a)
		Sarasota, FL 34233	:
			.,
nter new mailing address, if applicable:		5020 Clark Road	ند:
Mailing address MAY BE A POST OFFICE BOX)		#514	
		Sarasota, FL 34233	
If amending the registered agent and/or regent and/or the new registered office address		address on our records,	enter the name of the new registe
Name of New Registered Agent:	Emma Lugar		
New Registered Office Address:	5020 Clark Roa	nd. #514	
		Enter Florida stree	t address
	Sarasota		, Florida <sup>34233</sup>
		City	Zip Code

#### New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

	· · · · · · · · · · · · · · · · · · ·	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
MGR	Donna Lugar(formerly Donna Tisch)	5020 Clark Road, #514, Sarasota, FL 34233	⊠Add
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ffective date, if othe	er than the date of fil , the date must be specific ed in this block does no ate on the Department of	and cannot be prior to of meet the applicab	date of filing or more than 90 e statutory filing requires	(optional)  Deliant days after filing.) Pursuant to 605.020 nents, this date will not be listed a
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tote: If the date insert ocument's effective d	·	not an effective time	, at 12:01 a.m. on the ear	lier of: (b) The 90th day after th

Filing Fee: \$25.00